State of Wisconsin
Crime Victims Rights Board
FORMAL COMPLAINT

The Wisconsin Crime Victims Rights Board has the authority to review and take action on complaints relating to violations of the rights of crime victims. This board can review complaints and provide remedies in cases where violations of victims' rights have occurred. **The Crime Victims Rights Board cannot address or change the outcome of a case.**

Before bringing your complaint to the Crime Victims Rights Board, the law requires that you must first seek an informal resolution of your complaint through the Wisconsin Department of Justice. If you have not yet had contact with anyone from the Department of Justice (Office of Crime Victim Services, Victim Resource Center), you may call 1-800-446-6564 or write to Wisconsin Department of Justice, Office of Crime Victim Services (Victim Resource Center), P.O. Box 7951, Madison, WI 53707-7951. **You cannot complete the formal complaint form if you have not had contact with the Department of Justice.**

The Crime Victims Rights Board has the statutory authority to offer certain remedies in cases brought before them. The Board may:

1. Issue public or private reprimands of public officials, employees or agencies.

2. Refer complaints against judges to the Judicial Commission.

3. Seek other relief that may be ordered by a court as necessary to protect the rights of victims.

4. Bring civil actions to assess forfeitures (not to exceed $1,000) for intentional violations.

5. Issue reports and recommendations.

The individual against whom you are complaining (the respondent) will be notified that a complaint has been filed. The respondent will be entitled to information regarding this complaint including but not limited to, your name and the alleged rights violated.

If you have any questions while completing the complaint form, please contact Julie Braun at (608) 264-9498. Please complete the attached form and return it to the **Wisconsin Crime Victims Rights Board, Post Office Box 7951 Madison, Wisconsin 53707-7951.**

Crime Victims Rights Board

Formal Complaint Form

With whom have you had contact at the Wisconsin Department of Justice (Office of Crime Victim Services) in an effort to resolve your complaint? What was the nature and the result of this contact? You may attach an additional sheet of paper if the space provided is not enough.

SAMPLE

_____

Name of agency/individual against whom you are filing this complaint:

_____

VICTIM INFORMATION:

Name: **Phone and Best Time to Call:**

_____   _____

Address: **County of Residence:**

_____   _____

                                                  County Where Crime Occurred:

_____   _____

Time period during which violation(s) occurred:

_____

COMPLAINANT INFORMATION (If different from above):

Name: **Phone and Best Time to Call:**

_____   _____

Address: **County of Residence:**

_____   _____

                                                  Relationship to Victim:

_____   _____

➤ On a separate sheet of paper, please describe the nature of the incident surrounding your complaint. Please be specific as to which violation or incident you are referring, the time period or approximate date of the alleged violation and against whom you are filing a complaint. If you are filing a complaint against more than one individual or agency, please use a separate sheet of paper for each respondent (person or agency that you are filing a complaint against). Please include information regarding the current status of your case.

➤ If you would like further information regarding the rights of crime victims, including a complete list of crime victims' rights please call 1-800-446-6564.

If this form has been prepared on behalf of the victim, the victim must sign this form in order for sanctions to be considered. If the victim does not sign this form, the Crime Victims Rights Board will only consider the complaint for possible reports and recommendations.

I hereby swear that the information I have provided on this complaint form is accurate and true to the best of my knowledge.

_____   _____
Signature (Victim)   **Date**

_____   _____
Signature (Complainant, if different from victim)   **Date**

_____   _____
Signature (Person preparing complaint   **Date**
if different from either of the above)